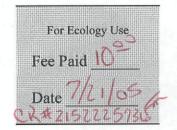


State of Washington



Application for a Drought Permit
Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGA	ANIZATION, OR WATER SYSTEM
Name Kennewick Irrigation District	Home Tel:(\$09)586 - 9111
Mailing Address 12 W. Kennewick Ave	
City Kennewick State WA Zip+4 983	36 +3832 FAX: (29)586 - 7663
Section 2. CONTACT - PERSON TO CAL ☐ Same as above	L ABOUT THE APPLICATION
Name Richard Evans	Home Tel:(
Mailing Address 12 West Kennewick Ave	Work Tel:(509)586 - 9111
City Kennewick State WA Zip+4 9933	36 + FAX:(509)586 - 7663
Relationship to applicant KID District E	ng in eer
Section 3. STATEMENT OF INTENT	
of Irrigation DESCRIPTION OF THE PLACE OF USE. (See instruction of the place of use)	ground water source (check only one) for the purpose(s) ATTACH A "LEGAL" ctions.) NOTE: A tax parcel number or a plat number is not per year: with Library Lyans on 7-35
Check if the water use is proposed for a short-term pro	oject. Indicate the period of time that the water will be needed:
From 8 / / /05 to 10 / 15/08	
Section 4. WATER SOURCE	
	If GROUNDWATER
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ECY 040-1-14 D Rev. 3/05 * * f

APPLICATION

Appl. No.: 64-35037

Se	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named:
B.	Briefly describe your proposed water system. (See instructions.)
	e de la productión de la company de la fill de la company de la company de la company de la company de la comp La company de la company d
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.
B.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 20,201
B.	List total number of acres for other specified agricultural uses:
	Use Acres) See Attached Crop and
	Use Acres See Affached Crop and Use Acres Water Data - Year 2004 Use Acres
~	
C.	Total number of acres to be covered by this application: 29,201
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Directions same as those given with Emergency Drought Application No. 64.34998.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

The Kennewick Irrigation District has developed a Water Use Agreement with Horold Brinkley to use the well as supplemental irrigation. Harold Brinkley, 320 N. Johnson St. S.: te 325 Kennewick, WA 99336

B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

☐ YES ☐ NO

Agreement will be forthcoming

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

Landowner for place of use (if same as applicant, write "same")

Date

7/20/05

e are returning your application for the follo	wing reason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETUR
Examination fee was not enclosed		TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)	is/are	TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128 APPLICANT PLEASE RETURN TO THE APPROPRIATE
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Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

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To receive this document in an alternate format, contact the Water Resources Program at (360) 407-6600 (Voice) or 711 and 1-800-833-6388 (TTY).